



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 2547

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER 10/673,618 | FILING DATE 09/29/2003 RULE | CLASS 514 | GROUP ART UNIT 1617 | ATTORNEY DOCKET NO. 1256-00922 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

APPLICANTS

Hector F. DeLuca, Deerfield, WI;

Connie M. Smith, Blue Mounds, WI;

** CONTINUING DATA *****

This application is a DIV of 10/045,941 10/19/2001 ABN

*which is a division of 09/616,778, 7/14/2000, now patent 6,306,844**which is a CIP of 09/135,463, 8/17/1998, now patent 6,127,559, which is a CIP of*

** FOREIGN APPLICATIONS *****

*08/819,694, 3/17/1997**None SH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 01/03/2004

| | | | | |
|---|---------------|--------------|-------------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY WI | DRAWING 3 | CLAIMS 5 | CLAIMS 1 |
| Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials | | | | |

ADDRESS

26753
 ANDRUS, SCEALES, STARKE & SAWALL, LLP
 100 EAST WISCONSIN AVENUE, SUITE 1100
 MILWAUKEE, WI
 53202

TITLE

Use of 2alpha-methly-19-nor-20(S)-1alpha,25-dihydroxyvitamin D3 to increase bone strength

FILING FEE

RECEIVED

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

| |
|--|
| <input type="checkbox"/> All Fees |
| <input type="checkbox"/> 1.16 Fees (Filing) |
| <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| <input type="checkbox"/> 1.18 Fees (Issue) |

375

☐ Other _____

☐ Credit _____